### REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R9 /11-99) Indiana Election Commission (IC 3-9-5-14) Accroved by State Board of Accounts 1999

FILED

(CFA-4) Summary Sheet

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TOTAL PAGES IN ENTIRE CFA-4 REPORT

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For assistance in completing this form, see instructions on the reverse side.

IS THIS AN AMENDMENT? 

Yes 
No

COMMITTEE INFORMATION 1. Full name of committee (as on Statement of Organization) Check if this is a new name SUE ROWLAND ELECT OMM ITTEE TO 3. Committee telephone number 2. Acronym or abbreviated name, if any 4. Mailing address (address where all campaign finance correspondence is received) Check if this is a new address P.O. BAX 5. City, state, ZIP code 6. Party affiliation (if applicable) REPUBLICAN IN 46061 CANDIDATE INFORMATION (For Candidate's Committees Only) 7. Full name of candidate (include any nickname) 8. Party affiliation or if independent SUE ROWLAND 9. Office sought (Include district number, if any. Not required for exploratory committee.) 10. County of residence HAMILTON DMMON COUNCIL AT LARGE- HOBIESUILE TYPEOFREPORT CONVENTION CANDIDATES ONLY 11. Check one: Check one: Pre-Primary Pre-Election Annual Final / Disbands Committee (lines 18, 19, and 20 must be "0") Pre-Convention Outpoing Treasurer (within 10 days amend Statement of Organization) Post-Convention 12. Reporting period: COLLIMNA COLUMN B 10.10.03 This Period Year to Date From: 4.11.03 Through: 13. Cash on hand and investments at the beginning of this reporting period. 14. Cash on hand and investments January 1, current year. 0 CONTRIBUTIONS AND RECEIPTS (Note: these amounts include in-kind contributions and loans, as well as cash contributions.) 3966.75 3966.75 15a. Itemized (use Schedule A) 15b. Unitemized 3966.75 3966.75 15c. Add lines 15a, and 15b in both columns SUBTOTAL 3966.75 16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B TOTAL 3 966.75 **EXPENDITURES** (Note: These amounts include in-kind expenditures and loan repayments.) 3966.75 3966.75 17a. Itemized (use Schedule B) (Public Question: use Schedule C) 17b. Unitemized 3966.75 SUBTOTAL 17c. Add lines 17a and 17b in both columns 18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns) TOTAL 19. Debts OWED BY the committee (use Schedule D)

CERTIFICATION

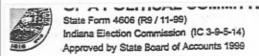
FOR OFFICE USE ONLY

Signature on File

20. Debts OWED TO the committee (use Schedule E)

WARNING: Any information contained in this report may not be copied for sale or used for any commercial purpose.

(IC 3-9-4-5) A person who knowingly files a fraudulent report commits a Class D Felony. (IC 3-14-1-13) A person who fails to file a complete or accurate report as required by the Indiana Campaign Finance Law commits a Class B Misdemeanor (IC 3-14-1-14) and may be subject to civil penalties (IC 3-9-4-16, 3-9-4-17, 3-9-4-18.)

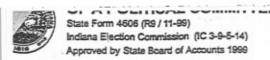


# CONTRIBUTIONS BY INDIVIDUALS Itemized Contributions and Other Receipts

IRUCTIONS: LIST ONLY CONTRIBUTIONS BY INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly LACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse. This schedule is used to document contributions and receipts totaled on ITEM15a of the Summary Sheet sumulative contributions from individuals OVER \$100 per contributor, within a calendar year MUST be ized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds repsyments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER 0 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party mittee). A contributor's occupation is required if an individual makes at least \$1,000 in contributions during calendar year. Otherwise, this is optional.

	FILE	NUMBE	R	
Page	/	of	2	

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
SANDRA ELLIOTT THOMPSON	Contributions:    Direct   In-Kind (describe)			4000
1263 CLINTON ST.		50.00	-	4.20.0
NOBLESVILLE, IN 46060	Other Receipts:			
ributor's Occupation (if required)	Combutan	-		
ROSALIE M. MOREY	Contributions:    Direct   In-Kind (describs)			4.21.03
72 70 . OAK COYE LANE		300.00	-	1,20,00
NOBLESVILLE, IN, 46060	Other Receipts: Interest □Lcan Misc (specify)			
ributor's Occupation (if required)				-
MR. MRS. J.L. SWANK	Contributions:  [2fBirect			4.22.0
995 STARDUST BLYD		10000		
NOBLESVILLE, IN 46060	Other Receipts:  Interest □Lcan  Misc (specify)			
ributor's Occupation (if required)				
LINDA-STAN MURRAY	Contributions:  Direct In-Kind (describe)			4.14.0
7236 OAKBAY DR.		100,00		
NOBLES VILLE, IN 46060	Other Receipts: Interest □Loan Misc (specify)			
ributor's Occupation (if required)		-		
JOHN AND BETTY L. KYLE	Contributions:  Di Direct In-Kind (describe)			4.14.0
3 47 SANDBROOK DR. NOBLESVILLE, IN 46060	Other Receipts:	4500	_	117.0
ibutor's Occupation (if required)	☐ Misc (specify)			
OUD TATLE T	HIS PAGE OF SCHEDULE A	\$ 625,00		
TOTAL OF ALL PAGES OF SCHEDULE A		13 023100		
(Enter total on ITEM 15a of the Summary		S		对 陈 经 点 《 图 】 意



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CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED BY
D. J. AND GAIL ALMQUIST	Contributions:  Direct  In-Kind (describe)			4.14.03
7249 LANDS END CR. NOBLESVILLE, IN 46060	Other Receipts:	50.00	_	
ributor's Occupation (if required)				
WILLIAM REID 104 WILSHIRE CT	Contributions: Direct In-Kind (describe)			4.14.0
NOBLESVILLE, IN 46060	Other Recsipts:	100,00	_	
fibutor's Occupation (if required)				
k. k.	Contributions:  Direct In-Kind (describe)			
ibutor's Occupation (f required)	Other Receipts:			
autor 3 Occupazor (n rejuzes)	Contributions:  Direct In-Kind (describe)			
ibutor's Occupation (if required)	Other Receipts: Interest □Loan Misc (specify)			
	Contributions:  Direct In-Kind (describe)			
	Other Receipts:			
butor's Occupation (if required)				Some Bone of
	HIS PAGE OF SCHEDULE A	\$ /50.00		
TOTAL OF ALL PAGES OF SCHEDULE A  (Enter total on ITEM 15a of the Summary	Sheet)	\$ 775 00		



### REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R9 / 11-99) Indiana Election Commission (IC 3-9-5-14) Approved by State Board of Accounts 1999

# (CFA-4 SCHEDULE A-2) CONTRIBUTIONS BY CORPORATIONS Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY CORPORATIONS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from corporations OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

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	BUTOR'S FULL NAME AND FULL MAILING ADDRESS street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
And south second to a	PON 357	Contributions:  PDirect In-Kind (describe)	500.00	e prima bos	4.15.0
	ESVILLE, 1N 46061	Other Receipts:	dodranco a p	nhetas sanW	PORTANT
2	a, que ). For "miscullamenta", be as specific ution, including la-kind, transfero-in or ether re-	Contributions:  Direct In-Kind (describe)	es vari sign PERIOD: 8	MOCTALISM BURY TRUCK BURY TRUCK	MOO BO DO SUCTO BEFORE SUBBIN A AB
	onbributions; including in-ldnd, transfers-in or o	Other Receipts:	J-OT-RASY	ENTA JUN	LUMN B CL
3. A <sub>t</sub> t mules	on B la die some as the entry in sivud. For checks and money amers indicate	Contributions:  Direct In-Kind (describe)	calender -	on af each	the flost re TE RECEIVE
	not or exposized in an account. For main committee, in the committee, (15)	Other Receipts:	cesh is non	are check or B Monived when I Enter the	ers anodudri
Tuens later o	ONLY Ense (OW PRE LAST PAGE ONLY) the	Contributions:  Direct In-Kind (describe)	SCHEDULE  ACHEDULE	PAGES OF	STOTAL THE
		Other Receipts:  Interest □ Loan  Misc (specify)	o orugil el il re	ne cetA, A, etch	and to segue.
		Contributions:			
		Other Receipts:  Interest I Loan Misc (specify)			
	SUB TOTAL TOTAL OF ALL PAGES OF SCHEDULE (Enter total on ITEM 15a of the Summar	THIS PAGE OF SCHEDULE A A ON THE LAST PAGE ONLY	\$ 500.00 \$ 500.00		



### REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R9 / 11-99) Indiana Election Commission (IC 3-9-5-14) Approved by State Board of Accounts 1999

### (CFA-4 SCHEDULE A-5) CONTRIBUTIONS BY OTHER ORGANIZATIONS

#### Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY ORGANIZATIONS OTHER THAN CORPORATIONS, LABOR ORGANIZATIONS, POLITICAL ACTION COMMITTEES AND INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from other entities OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All transfers-in and in-kind contributions regardless of the amount from candidate's, legislative caucus, and regular party committees MUST be itemized on this schedule. All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

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	CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED
1.	BETHEL A. M. E. CHURCH 697 SOUTH 5th ST	Contributions:	400.00	the grillam box	4.17.03
	NOBLESVILLE, IN 46060	Other Receipts:  Interest □ Loan  Misc (specify)	700,5		
2	signs over \$100 willow a calendar year (\$200 if regular narry ob.	Contributions:  Direct In-Kind (describe)	moo iis to seem irii bigq avad sa	ta gnilism bra w analice achu	omen list ers cheel, This inc
		Other Receipts:  Interest □Loan  Misc (specify)	a contributor	Dun enlanns RIBUTION	ORTANT: V
3.	eution, including in-list st, branstem-in or object receipts for thrue	Contributions:  Direct In-Kind (describe)	FERIOD: Em	SHIT THUS	MAA A HARA bonoq po
	contributions including in-kind, translations or other mospile.  A series as the entiry in Column A.	Other Receipts:  Interest □ Loan  Misc (specify)	EAR-TO-DA	STATION OF THE	UMPN B CUP Seryose-to-data
4.	ceived. For checks and maney onten indicate the case the less on account. For each contributions, the most Mor. Mor. account.	Contributions:  Direct In-Kind (describe)	enth, day, und ney order, NOT cash is accep	D: Entertie m on check or and ceived whee	SVISOSA SECULO
	he coordinates the parameter (10 3-3-1-25) age of Schedule A. If there is only one page of this Schedule.	Other Receipts:  Interest □Loan  Misc (specify)	committee o	Enter the PAGE OF S	EIVED BY
5.	ONLY: Brise (OW THE LAST PAGE OWLY) the local amount basic.	Contributions:  Direct In-Kind (describe)	A BLUCERS	AGES OF S	L OF ALL P
		Other Receipts:  Interest □ Loan  Misc (specify)			
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	TOTAL OF ALL PAGES OF SCHEDULE A (Enter total on ITEM 15a of the Summary	ON THE LAST PAGE ONLY Sheet)	s 400.00		



#### REPORT OF RECEIPTS AND EXPENDITURES **CF A POLITICAL COMMITTEE**

Indiana Election Commission (IC 3-9-5-14) Approved by State Board of Accounts 1999

State Form 4606 (R9 / 11-99)

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For assistance in completing this INSTITUTIONS: Please type or print legicity in BLACK INK as information on this form. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document expenditures totaled on ITEM 17a of the Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and other entities OVER \$100 per recipient, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative expenses, including in-kind, regardless of amount paid to political committees (such as transfers-out from candidate, legislative caucus, political action, or regular party committees) MUST be itemized on this schedule.

#### (CFA-4 SCHEDULE B) Itemized Expenditures

	FILE	NUMBE	₽R	
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RECIPIENT'S NAME AND MAILING ADDRESS  (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION	TYPE OF EXPENDITURE and	COLUMN A AMOUNT THIS	COLUMN B CUMULATIVE	DATE OF EXPENDITURE
	OFFICE SOUGHT (if applicable	PURPOSE (be specific)	PERIOD	YEAR-TO-DATE	EXPENDITURE
ROWLAND PRINTING- 199 N. NINTH ST. NOBLESVILLE, N 46060	PRINTER.	Direct   In-Kind   Payment of Debt   Returned Contribution   Other   Purpose:   POSTAGE   FOR MAILING	123.81		4.23.03
COME AD PRINTING- 199 N. NINTH ST NOBLESUILLE, IN 46060	PRINTER	Divirect   In-Kind   Payment of Debt   Returned Contribution   Other   Purpose: YARD SIGNS   GIVEAUAYS   INSERTS	1509.19		8.6.23
ROWLAND PRINTING- 199 N. NINTH ST NOBLE QUILLE, IN 46060	PRINTER	Poirect   In-Kind   Payment of Debt   Returned Contribution   Other   Purpose:	42.00		8.6.03
ROWLAND PRINTING- 199 N. NINTH ST NOBLESUILLE, IN 4686	PRINTER	Direct In-Kind Payment of Debt Returned Contribution Other Purpose: WALLIAG POSTAGE - 4 COLOR POSTCARDS	1457.75		8.6.03
Code A HOMETOWN T.V. P. O. BOX 1386 NOBLESVILLE, IN 4606	TV STATION	□ Direct ★In-Kind □ Payment of Debt □ Returned Contribution □ Other □ Purpose:	840.00		4.22.03
Code		□ Direct □ In-Kind □ Payment of Debt □ Returned Contribution □ Other □ Purpose:			
2ode		Direct in-Kind Payment of Debt Returned Contribution Other Purpose:			
	SUB TOTAL THE	S PAGE OF SCHEDULE B	\$3966.75		Š.
	PAGES OF SCHEDULE B O	N THE LAST PAGE ONLY	\$ 3966.75		